FILED FFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

10 DEC 14 AN 11: 06

Click here to clear form.

SECRE RY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

The assumed business reputation business is:	name which the undersig	ned use(s) in the transaction of	
2. The true name(s) and <u>business</u> under the assu <u>Name</u> Thrive Systems, Inc.	med business name:	e entity or individual(s) doing <u>Complete Address</u> E Hwy 193, Layton, UT 84040	
Retail Trade Wholesale Trade Services Manufacturing	☐ Transportation and I☐ Construction☐ Agriculture☐ Mining	Submit Certificate of Assumed Business	
4. The name and address to correspondence should leading to Jamie Sorensen 1645 E Hwy 193 Layton, UT 84040	to which future	Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for the copy is (if other than # 4 above):	_		
Signature: Printed Name: Bailey Hall Capacity/Title: President	3 2	Secretary of State use only	
Signature:		TRAHO SECRETARY OF STATE	
Printed Name:		12/14/2010 05:00 CK: 6166 CT: 253334 BH: 1258852	
Capacity/Title:		1 8 25.00 = 25.00 ASSUM NAME # 2	

abn.pmd Rev. 07/2010

D143969